

COPY

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	M-3417-1C US	Total Pages (This form)	2
	First Named Inventor or Application Identifier			
	Moshe Finarov			
	Express Mail Label No.	TB 894 714 832 US		

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form - see page 2 of this form. (Submit an original, and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Specification (Total Pages 13) (preferred arrangement set forth below) • Descriptive title of the Invention (on page 1) • Background of the Invention (2 pages) • Brief Summary of the Invention (1 page) • Brief Description of the Drawings (1 page) • Detailed Description (5 pages) • Claim(s) (3 pages) • Abstract of the Disclosure (1 page) 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 2 as follows: Informal filed with prior application (7 sheets); red-inked (2 sheets); 4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 5 as follows: Unsigned (2 pages) and Signed filed with Missing Parts (3 pages) a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) c. <input checked="" type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 5. <input checked="" type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	6. <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 8. <input type="checkbox"/> Assignment Papers (cover sheet & documents) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> 10 Copies of IDS Statement (IDS) (2 pages)/PTO-1449 (1 sheet) Citations 12. <input checked="" type="checkbox"/> Preliminary Amendment (5 pages) 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized) 14. <input checked="" type="checkbox"/> Small Entity Statement (2 pages) <input checked="" type="checkbox"/> Statement filed in prior application; status still proper and desired <input type="checkbox"/> Is no longer claimed. 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Other:
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. 08/497,382, filed 06/29/95	

18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label		or Correspondence address below			
Name	David W. Heid			Reg. No. 25,875	
Attorneys for Applicant	SKJERVEN, MORRILL, MacPHERSON, FRANKLIN & FRIEL LLP				
Address	25 Metro Drive, Suite 700				
City	San Jose	State	CA	Zip Code	95110
Country:	United States	Telephone	(408) 453-9200	Fax	(408) 453-7979

19. Fee calculations.

CLAIMS (Number Filed)	(1) FOR	(2)		(3) NUMBER EXTRA		(4) RATE		(5) CALCULATIONS
3	TOTAL CLAIMS (37 CFR 1.16(c))	-20	=	0	x	\$22	=	\$ 0.00
1	INDEPENDENT CLAIMS (37 CFR 1.16(b))	-3	=	0	x	\$82	=	\$ 0.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.18(d))				+	\$270.00	=	\$ 0.00
						BASIC FEE (37 CFR 1.16(a))	=	\$790.00
						Total of above Calculations	=	\$ 790.00
						Reduction by 50% for filing by small entity (Note 31 CFR 1.9, 1.27, 1.28).	=	\$ 395.00
						TOTAL	=	\$ 395.00

20. **FEES:** The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. **19-2386**:

- a. ☒ Fees required under 37 CFR 1.16. (U.S. Application Filing Fees)
 b. ☒ Fees required under 37 CFR 1.17. (Conditional Extension of Time Fees)
 c. ☐ Fees required under 37 CFR 1.18. (Patent Issue Fees)

21. ☐ Other: _____

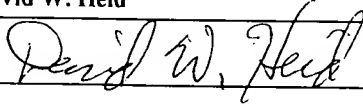
NOTE:

The prior application's correspondence address will carry over to this UPA UNLESS a new correspondence address is provided below.

22. NEW CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label		New correspondence address below			
NAME					
ADDRESS					
CITY	STATE		ZIP CODE		
COUNTRY	TELEPHONE		FAX		

23. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Skjerven, Morrill, MacPherson, Franklin & Friel LLP 25 Metro Drive, Suite 700 San Jose, CA 95110 Tel. (408) 453-9200 Fax. (408) 453-7979	
Date:	March 25, 1998
Name	David W. Heid Reg. No. 25,875
Signature	
Express Mail Label No.	TB 894 714 832 US